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	Bachman & Lap Suite 1201		NOV 1 2	7, 1 be 2007 Sin					
	900 Chapel Street New Haven, CT 06510-2802			Æ/ F	Alicia Ther			(Depusitor's name)	
11.	11/13/2007 CDTDCTAD AAAAAAA AAAAAA			MARKE (MODER) PO		Their all		(Signature)	
	ED 4504	_	9684174	-	November 12	,	<u> </u>	(Date)	
ΛI		.00 DA		FIRST NAMED INVENTOR		<u></u>		CONFIRMATION NO.	
	APPLICATION NO. FILING DATE					00-623		1693	
	09/684,174 10/06/2000			Mark Morelli 100-523 100-525 1			EATING,		
	VENTILATION, REFRIC	EMETHOD FOR WIR GERATION, AND AIR	CONDITIONING SYST	EMS					
	APPI,N. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID IS:	UE FEE	TOTAL FEE(S) DUE	DATE DUE	
	nonprovisional	NO	\$1400	\$0	\$0		\$1400	11/14/2007	
	EXAM	INER	ART UNIT	CLASS-SUBCLASS					
	NGUYEN	I, HUY D	2617	455-420000					
	"Fee Address" ind PTO/SB/47; Rev 03-0 Number is required. 3. ASSIGNEE NAME A PLEASE NOTE; Unirecordution as set fort (A) NAME OF ASSIGNEE NAME OF ASSIGN	ondence address (or Cha 3/122) attached. ication (or "Fee Address 12 or more recent) attack ND RESIDENCE DAT. less an assignee is ident h in 37 CFR 3.11. Com GNEE Carrier: Corpo	mge of Correspondence "Indication form hed. Use of a Customer A TO BE PRINTED ON hified below, no assignee pletion of this form is NO ration r categories (will not be p	2. For printing on the patent front page list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agents) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. THE PATENT (print or type) adata will appear on the patent. If an assignce is identified below, the document has been filed for or a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) Hartford, CT printed on the patent): Individual Corporation or other private group entity Government					
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	Authorized Signature	X	57		Date	lovenber	12, 2007		
	George A. Coary			Registration No34,309					
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FAX COVER LETTER

TO: <u>USPTO</u>	FROM: George A. Coury						
FAX NO.: 1-571-273-2885	DATE: <u>November 2, 2007</u>						
YOUR REF:09/684,174	OUR REF.: 00-623						
PAGES:_	2 including this sheet						
Confirmation Copy to Follow:Yes _XNo							
Comments:							

I hereby certify that this correspondence is being facsimile transmitted this 12th day of November, 2007 to the USPTO, at fax number 1-571-273-2885.

Alicia Therriault

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